

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2989 / 4623

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Marco Rubio for President

A. Full Name (Last, First, Middle Initial)

DR. GREGORY RALEIGH

Mailing Address 131 FOX HOLLOW ROAD

City

WOODSIDE

State

CA

Zip Code

94062-3607

FEC ID number of contributing
federal political committee.

C

Name of Employer

I.B.O., INC.

Occupation

CEO/CHAIRMAN/FOUNDER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.759759

Date of Receipt

05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)

MRS. PATTY RALEIGH

Mailing Address 131 FOX HOLLOW ROAD

City

WOODSIDE

State

CA

Zip Code

94062-3607

FEC ID number of contributing
federal political committee.

C

Name of Employer

ORIGINAL VENTURES

Occupation

OWNER/PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.759729

Date of Receipt

05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)

MR. CHARLES D. RALLS

Mailing Address P.O. BOX 27968

City

PANAMA CITY

State

FL

Zip Code

32411-7968

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST
EFFORTS

Occupation

INFORMATION REQUESTED PER BEST
EFFORTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

540.00

Transaction ID : SA17.748703

Date of Receipt

05 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....

5900.00

Total This Period (last page this line number only).....